EBLIP8 – a delegate’s perspective

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In early July 2015 I headed to sunny Queensland with assistance from the Pat Nakouz Award from Health Libraries Inc. to attend the 8th International Evidence Based Library and Information Practice Conference (EBLIP8). The EBLIP conference is a biennial event that aims to promote the use of the best available evidence in practices and processes particular to the library and information profession. Everything at the conference centred on ‘evidence’. EBLIP define evidence as something that may include a diverse range of legitimate sources that librarians use in their decision-making processes, including quantitative and qualitative research, publications, locally collected statistics, open-access data and ‘soft’ sources, such as accumulated knowledge, opinion, instinct and relationships. For me, the most interesting papers were those that centred on the health field and those with a direct link to the daily work we undertake. An overview of these is below:

Patient journeys and user experiences: measuring value through service rounding
Presented by Suzanne Lewis, Central Coast Local Health District.

This paper discussed the current trend in healthcare regarding how the values and preferences of patients are integral to the current move towards ‘personalised evidence’ underpinning healthcare decisions. These are often talked about as ‘patient journeys’ or ‘patient rounding’. This service, along with service rounding, was introduced at the Central Coast Local Health District (CCLHD) in 2013 as part of an organisation-wide quality and safety program. In the case of the library, the service-rounding process generated short records of informal meetings, which often take the form of narratives – stories or examples of how the library service met (or did not meet) user expectations, values and preferences. At CCLHD the library manager undertook service rounding with a sample of nurse unit managers (NUMs) and other departmental managers across the health service. In practice, this meant organising a meeting with a NUM, asking them about their staffs’ use of the library, discussing responses and/or offering examples of services available. This was followed by an email outlining any follow-ups and discussion.

For me, this highlighted a different way to brand and market the library and to make contact with people you may not otherwise meet. As expected there were keen library users and some who avoided interviews, but as this was rolled out organisation-wide it was mandatory in a sense (which has pros and cons naturally). The data generated (or evidence) was, as expected, highly localised and contextual. I see so much potential in this type of systematic approach and will definitely look into it more. It is something I certainly do ‘some of the time’ but not in a structured way, which I think would give it more meaning.

Searching PubMed for a broad subject area: how effective are palliative care clinicians in finding the evidence in their field compared to a search filter?
Presented by Raechel A Damarell & Jennifer J Tieman, Flinders University.

This paper focused on research undertaken to assess how well clinicians searched PubMed compared to how well they think they search PubMed. The topic focused on palliative care literature as this can be challenging to search. Palliative care incorporates multiple models of care delivered across a large number of care settings by multidisciplinary teams. It is also a relatively new specialty so the literature around it lacks standardisation and there is a wide range of terminology used.
Palliative care clinicians were instructed to develop a search strategy they believed capable of retrieving as much of PubMed’s palliative care literature as possible. Searches were recorded and analysed for errors. They were also recreated in PubMed and combined with the test set to calculate search sensitivity. Results showed that clinicians struggled to create useful searches. Twelve used a single search term only, 17 narrowed the search inappropriately, and 8 confused the AND/OR Boolean operators. Three out of four clinicians (76%) believed they would find more than 50% of relevant literature. In reality, only 8 participants (22%) achieved this.

The search was then undertaken in CareSearch – the Palliative Care Search Filter. This retrieved 68% of test-set citations. I walked away from this paper thinking I need to give search filters ‘another go’. I think often as librarians we think we know the right way to do something and can often make things more complex for our users. So, armed with new knowledge, I endeavour to explore search filters a little more to see how they can complement the services we currently offer to users to simplify processes.

**Knowing how good our searches are: an approach derived from search filter development methodology**

**Presented by Sarah Hayman, CareSearch.**

This paper discussed the online learning modules called Smart Searching that were developed to help librarians be better searchers ([https://sites.google.com/site/smartsearchinglogical/home](https://sites.google.com/site/smartsearchinglogical/home)). The modules are based on knowledge derived from search filter development as part of CareSearch and Flinders Filters. The self-paced modules are intended to help librarians test the effectiveness of their literature searches, providing evidence of search performance that can be used to improve searches as well as evaluate and promote search expertise. The techniques include: collaboration with subject experts; use of a reference sample set; term identification through frequency analysis; and iterative testing. The paper reported on participation in the modules (via a questionnaire) in the first year of availability (May 2014–May 2015). It found that over 80% of people would recommend the site and feedback included comments such as how it helped librarians reassess the way they searched. One participant also commented that the more we share our knowledge about improving search techniques the better off the library profession will be; while another participant thought that, as we don’t generally test our search strategies as librarians, we could use it as a tool to argue our competence and relevancy.

From this and the previous paper I know my search skills have become rusty as I don’t use them daily like I used to. When back at work I aim for myself and my staff to work through these modules to refresh our skills and to learn new tips and tricks. Testing our search strategies is not something that occurs often so I am eager to learn more. Sarah also referred to the PubMed search strategies blog ([http://pubmedsearches.blogspot.com.au](http://pubmedsearches.blogspot.com.au)), which we can use to build searches upon. This is well worth a look to help guide those who search both frequently and infrequently to look at searching from a different point of view.